

PART B - FEE(S) TRANSMITTAL

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7590

03/28/2005

ARENT FOX KINTNER PLOTKIN & KAHN, PLLC

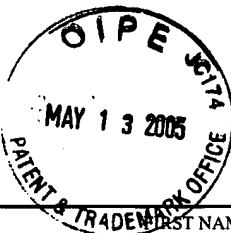
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1050 Connecticut Avenue, N.W.

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05/16/2005 MBEYENE2 00000086 10680211

01 FC:1501 1400.00 OP
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APPLICATION NO.	FILING DATE	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/680,211	10/08/2003	Shinichi Ueda	025416-00004	7448

TITLE OF INVENTION: AUTOMATIC VEHICLE DOOR LOCKING/UNLOCKING APPARATUS

Repln. Ref: 05/16/2005 MBEYENE2 0020341200
 DA# 012300 Name/Number: 10680211
 FC: 9204 \$10.00 CR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/28/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BLOUNT, ERIC	2636	340-426280

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Arent Fox, PLLC.

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Honda Giken Kogyo Kabushiki Kaisha

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

The PTO did not receive the following listed item(s) Form PTO-2038:

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☒ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2300 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date May 13, 2005

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